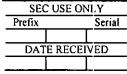
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

SEC Mail Processing Section

Expires: April 30, 2008 Estimated average burden hours per response.....16.00





NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Washington, DC

APR 15 2008

		110	
Name of Offering (check if t	his is an amendment and name has changed, and indicat	e change.)	
Common Stock and Series A I			
Filing Under (Check box(es) that	at apply): 🗌 Rule 504 🔲 Rule 505 🗵 Rule 506 🔲 5	Section 4(6) ULOE	
Type of Filing: 🔲 New Filing 🕻			
	A. BASIC IDENTIFIC	CATION DATA	
1. Enter the information request	ted about the issuer		
Name of Issuer (check if this	is an amendment and name has changed, and indicate of	hange.)	
Gnip, Inc.		_	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (inch	iding Area Code)
1683 27th Avenue		(413) 687-8098	
San Francisco, CA 94122			
	Operations (Number and Street, City, State, Zip Code)	Telephone Number (inch	uding Area Code)
(if different from Executive Off	ices)		
Brief Description of Business			
Holding company.			
Type of Business Organization			PPOOR
Corporation	☐limited partnership, already formed		PROCESSE
business trust	☐limited partnership, to be formed	other (please specify):	
	Month Year		APR 2 1-2008
Actual or Estimated Date of Inc		Actual Estimated	
Jurisdiction of Incorporation or	Organization: (Enter two-letter U.S. Postal Service abb	reviation for State:	MONSON
	CN for Canada; FN for other fo	reign jurisdiction) DE	THOMSON FINANCIAI

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		· · · · · · · · · · · · · · · · · · ·	A. BASIC I	DENTIFICATION DAT	ΓA			
X Each point X Each boot of the in X Each expression in the control of the contro	 X Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; X Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and 							
Check Box(es) th	at Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last	name first,	if individual)						
·	dence Add	ress (Number a	nd Street, City, State, Zip	Code)	· · · · · · · · · · · · · · · · · · ·			
c/o Gnip, Inc., 168				<u> </u>				
Check Box(es) th		Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last Feld, Brad	name first,	if individual)						
Business or Reside c/o Gnip, Inc., 168			nd Street, City, State, Zip co, CA 94122	Code)				
Check Box(es) th		Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last : Valeski, Judson	name first,	if individual)						
Business or Resid			nd Street, City, State, Zip	Code)				
c/o Gnip, Inc., 168						P		
Check Box(es) the Full Name (Last:		Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Foundry Venture	Capital 200	7, L.P.						
Business or Resid 1050 Walnut Stree			nd Street, City, State, Zip 80302	Code)				
Check Box(es) th	at Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last		if individual)						
Business or Resid	SoftTech VC II. L.P. Business or Residence Address (Number and Street, City, State, Zip Code) PO Box 1710, Palo Alto, CA 94302-1710							
Check Box(es) th	at Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner		
Full Name (Last	,	,						
Business or Resid	First Round Capital II, L.P., as nominee Business or Residence Address (Number and Street, City, State, Zip Code) 100 Four Falls Corporate Center, Suite 104, West Conshobocken, PA 19428							
Check Box(es) th	at Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last	name first,	if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) th	at Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last		if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) th	at Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner		
Full Name (Last)								
Business or Pecia	łanca Addi	race (Number or	nd Street City State 7in	Code		· · · · · · · · · · · · · · · · · · ·		

☐ Director

☐ General and/or Managing Partner

□ Promoter □ Beneficial Owner □ Executive Officer

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

	-	·				B. INFO	RMATIO	N ABOU	T OFFER	ING					
1.	Has the	issuer sole	d, or does tl	he issuer in	tend to sell,	to non-acc	redited inve	estors in thi	s offering?.					Yes	No ⊠
					ŀ	Answer also	in Append	lix, Column	2, if filing	under ULO	E.				
2.	What is the minimum investment that will be accepted from any individual?								\$ N/A						
3.									Yes ⊠	No					
4.	remune person	ration for : or agent of	solicitation fabroker o	of purchase r dealer reg	ers in conne istered with	ction with s the SEC a	sales of sec nd/or with a	urities in th a state or sta	e offering. ates, list the	If a person name of th	to be listed e broker or	ission or sin is an associ dealer. If n broker or d	iated nore than		
Full N N/A	Name (La	st name fii	rst, if indivi	dual)											
	ess or Re	sidence A	ddress (Nui	mber and S	treet, City,	State, Zip C	Code)		· · · · · ·	· · · ·			.		
Name	of Assoc	ciated Brol	ker or Deale	er			<u> </u>		 .		<u> </u>				
States	s in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers								
	(Check ".	All States"	or check in	ndividual S	lates)		• • • • • • • • • • • • • • • • • • • •					All States			
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	(AR) (KS) (NH) (TN)	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [M1] [OH] [WV]	[GA] [MN] [OK] [WI]	(HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full N			rst, if indivi	$\overline{}$	()	[0.]		[,,,,	(···· · · ·	(,, , ,	<u> </u>	ţ <u>,</u>	[]		
Busin	ess or Re	sidence A	ddress (Nui	mber and S	treet, City,	State, Zip C	ode)								
Name	of Assoc	iated Brol	ker or Deal	er											
States	in Whic	h Person L	isted Has S	solicited or	Intends to S	Solicit Purcl	hasers								
(Chec	k "All St	ates" or ch	eck individ	lual States)								All States			
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] (MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full N	Vame (La	st name fir	rst, if indivi	dual)										··· -	
Busin	ess or Re	sidence A	ddress (Nur	mber and St	reet, City,	State, Zip C	'ode)				·				
Name	of Assoc	iated Brol	ker or Deale	er											
States	in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purcl	nasers								
(Chec	k "All St	ates" or ch	eck individ	lual States)								All States			
	(AL) (IL) (MT) (RII	(AK) [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM]	[CT] [ME] [NY] [VT]	(DE) [MD] [NC]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WII	[HI] [MS] [OR] (WY)	[ID] [MO] [PA] (PR)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	TROCEEDS	
	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s	s
	Equity	\$ 1,100,930	\$ 1,100,930
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	s	s
	Partnership Interests.		S
	Other (Specify)		S
	Total		\$ 1,100,930
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	5	\$ 1,100,930
	Non-accredited Investors		S
	Total (for filings under Rule 504 only)		S
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		S
	Rule 504		S
	Total		S
١.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		S
	Legal Fees.	⊠	\$ 55,000
	Accounting Fees		S
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)		S
	Total	I⊠	\$ 55,000

4,	expenses furnished in response to Part C - Question				
	issuer."				\$ 1,045,930
5.	Indicate below the amount of the adjusted gross price purposes shown. If the amount for any purpose left of the estimate. The total of the payments lister forth in response to Part C - Question 4.b. above.	e is not known, furnish an estimate and c	heck the box to the		
				Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees	(***)***		□s	□s
	Purchase of real estate			□s	□s
	Purchase, rental or leasing and installation of macl	hinery and equipment		□s	□s
	Construction or leasing of plant buildings and faci	lities		□ s	□s
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asse pursuant to a merger)	ts or securities of another issuer		□ s	□ s
	Repayment of indebtedness			□ s	□ s
	Working capital			□ s	☑ \$ 1,045,930
	Other (specify):			□ s	□s
	Column Totals			□ s	⊠ \$ 1,045,930
	Total Payments Listed (column totals added)		⊠ \$ 1,045,930		
		D. FEDERAL SIGNATUR	Ē		
n ur	ssuer has duly caused this notice to be signed by the dertaking by the issuer to furnish to the U.S. Securi accredited investor pursuant to paragraph (b)(2) of F	ities and Exchange Commission, upon wi			
	uer (Print or Type)	Signature	Date	1.4	•
	ip, Inc.	2	April	11,2008	
	me of Signer (Print or Type) ic Marcoullier	Title of Signer (Print or Type) President			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

